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June 10, 1998  
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Craig A. Summerfield, Reg. No. 37,947  
Name of Registered Representative

*Craig A. Summerfield*  
Signature

#13.  
5/7

Case No. 5050/293

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application:

BRADLEY, CHARLES E. *et al.*

Serial No.: 09/061,014

Filed: April 15, 1998

For: HARMONIC IMAGING WITH  
PREDISTORTED TRANSMIT  
WAVEFORMS

Examiner:

Group Art Unit:

## SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Assistant Commissioner for Patents  
Washington, D.C. 20231

Sir:


Applicants have enclosed a form PTO-1449. Applicants request that the reference listed in the form PTO-1449 be reviewed and made of record. A copy of the reference is enclosed.

Applicants believe that this patent either alone or in combination with the references cited in the previous Information Disclosure Statement neither disclose nor

suggest Applicants' claimed invention. Applicants, however, respectfully request that the Examiner review the entire disclosure of this patent and place an indication in the file that he has reviewed it (MPEP § 609 D).

Respectfully submitted,

Dated: June 10, 1998

  
\_\_\_\_\_  
Craig A. Summerfield  
Registration No. 37,947

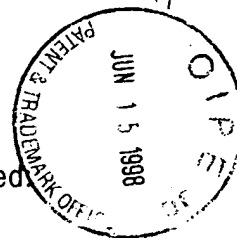
Attorney for Applicants

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CO No. 5050/230  
Applicant HOSSACK, et al.



Hon. Commissioner of Patents & Trademarks  
Washington, D.C. 20231



Please acknowledge receipt of the below-identified

Transmittal Letter (in duplicate), ~~Second~~ Supplemental  
Information Disclosure Statement, PCO-1449 and copy of  
reference.

BRINKS HOFER GILSON & COMPANY

**RECEIVED**

By: Craig A. Summerfield, Reg. No. 37,947  
FEB 02 1998

**Group 3700**

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NOTICE OF MAILING TO PATENT OFFICE

APPLICANT: \_\_\_\_\_

CLIENT/MATTER NO: \_\_\_\_\_ Applicant: John A. Hossack, et al.

ITEM(s) MAILED: \_\_\_\_\_ Client/Matter: 5050/230

DATE DUE: \_\_\_\_\_ Items Mailed: Transmittal Letter (in duplicate),  
Supplemental Information Disclosure Statement, PCO-1449  
and copy of reference.

DATE OF MAILING: \_\_\_\_\_ Date of Mailing: June 10, 1998

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MEMO TO  
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CAS  
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